

Kansas Electrical Education Review Committee

APPLICATION FOR APPROVAL OF CONTINUING EDUCATION

Submit application to the Chairman of the Electrical Education Review Committee:
tkerschen@wichita.gov or fax: 316 268-4663 Attn: Tom Kerschen

COMPANY NAME (Sponsor) _____

INSTRUCTOR (attach short bio) _____

COURSE NAME _____

SUBJECT MATERIAL (outline description of class)

LOCATION _____

CLASS ROOM HOURS _____

DATE(S) OF CLASS _____

.....*Official use only, do not write below this line*.....

APPROVED – YES ____ **NO** ____ **CODE EDUCATION – YES** ____ **NO** ____

IF NOT APPROVED PLEASE STATE REASON:

Signed _____
Chairman

Date _____